

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TS	041501	
O.I.P.E. CLASSIFIER	DR	32	07/25
FORMALITY REVIEW	ST	1081	08/08/01
RESPONSE FORMALITY REVIEW	DOD	68971	10/19/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	6	1	7/14
2	21	15	
3	63	04	04
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If more than 150 claims or 10 actions  
staple additional sheet here

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12/25/00

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